Los Angeles County Sheriff's Department

Officer Involved Shooting

Report Date: 03/18/18	Bureau/Station/Facility: East Patrol Division / Temple Station	Admin. Invest.? ☐ Hit? ☑

Incident Information

URN: 018-03394-0563-013	Date: 03/18/18 Time: 0845
City or Station: South El Monte	Nature of Incident: During a burglary investigation, the suspect ran from deputies and a foot pursuit ensued. The suspect produced a knife and a deputy involved shooting occurred.
Location: [redacted] Durfee Avenue, South El Monte , CA 91733	

Location Type (check one or more):
- ☐ Backyard
- ☐ Beach
- ☐ Business
- ☐ Freeway
- ☐ Industrial
- ☐ Park
- ☐ Parking Lot
- ☐ Residence
- ☐ Rural
- ☐ School
- ☑ Street
- Other:

Lighting (check only one):
- ☐ Darkness
- ☑ Daylight
- ☐ Other
- ☐ Street Lights

Weather (circle only one):
- ☑ Clear
- ☐ Cloudy
- ☐ Fog
- ☐ Rain

Distance:

Incident Type (check one or more):
- ☐ Accidental
- ☑ Armed Person
- ☑ Fleeing Suspect
- ☑ Foot Pursuit
- ☐ Gun Take Away
- ☐ Moving Vehicle
- ☐ Sniper/Ambush
- ☐ Startle
- ☐ Struggle Involved
- ☐ Traffic Stop
- ☐ Unarmed Person
- ☐ Unintentional
- ☐ Vehicle Pursuit
- ☐ Warrant Service
- ☐ Warning Shot
- Other:

Initiated by (check only one):
- ☐ Arrest Warrant
- ☑ Call
- ☐ Observation
- ☐ One Person Unit
- ☐ Other
- ☐ Search Warrant
- ☐ Two Person Unit

Prior Activity (check only one):
- ☐ Detective
- ☐ Inmate Transport
- ☐ Other
- ☑ Routine Patrol

Total # of Shots Fired by Deputy: 3

Total # of Shots Fired by Suspect: 0

Aero Unit? ☐ Canine Unit? ☐

Employee Witnesses

Employee #	Last Name	First Name	M.I.	ShiftTime (check only one)	ShiftType (check only one)
[redacted]	Bui	Vu	N	☐ EM ☐ PM ☑ Day	☑ Regular ☐ Overtime ☐ Off Duty
				☐ EM ☐ PM ☐ Day	☐ Regular ☐ Overtime ☐ Off Duty
				☐ EM ☐ PM ☐ Day	☐ Regular ☐ Overtime ☐ Off Duty

Non-Employee Witnesses

Last Name		First Name			M.I.
Street Address	City	Zip Code	Work Ph	Home Ph	
Last Name		First Name			M.I.
Street Address	City	Zip Code	Work Ph	Home Ph	
Last Name		First Name			M.I.
Street Address	City	Zip Code	Work Ph	Home Ph	

Supervisors

Employee #	Last Name	First Name	M.I.	(check one or more)
[redacted]	Long	James	P	☑ On Duty ☐ Present during shooting ☐ Witness to shooting ☐ Involved in shooting
				☐ On Duty ☐ Present during shooting ☐ Witness to shooting ☐ Involved in shooting

Watch Sergeant

Employee #	Last Name	First Name	M.I.
[redacted]	Mikesell	Steven	F

Watch Commander

Employee #	Last Name	First Name	M.I.
[redacted]	Martinez	Michael	A

PSTD Use Only

SH # ______________

Officer Involved Shooting
Involved Employee Information

URN: 018-03394-0563-013

Involved Employee

E 1

Employee # [redacted]	Last Name: Dietze	First Name: Bradley	M.I.: S
Sex: M Race: W	Rank: DSG	Unit Assignment: Temple Station	Work Assignment (Unit #, Module, etc.): 55T1
ShiftTime (*circle only one*): [ ] EM [ ] PM [x] Day	ShiftType (*circle only one*): [ ] Regular [x] Overtime [ ] Off Duty	Intoxication/Drug Usage? [ ]	Substance Used: N/A
Hospital Admission? [ ]	Hospital Name: N/A	Coroner Case? [ ]	Coroner Case #: — Interviewed? [x]
Hrs of sleep prior to shooting: 6	Duty Time (hrs): [redacted]	Clothing (*circle only one*): [ ] Plain Clothes no Vest [ ] Plain Clothes w/ Vest [ ] Raid Jacket no Vest [ ] Raid Jacket w/ Vest [ ] Uniform no Vest [x] Uniform w/ Vest	Other Factors:
Age: [redacted] Height: 508	Weight: 185		
Range Qualification Date: [redacted]	PPC Qualification Date: [redacted]	Laser Training Date: [redacted]	
Certified with Weapon Used? [redacted]	Patrol Certification? [redacted]	Certification Unit: [redacted]	Prior Shootings? [redacted] Number of Prior Shootings: [redacted] Directed Force: [redacted]
Weapons Fired Brand: Heckler & Koch Caliber: .45 # Shots: 3		Weapons Fired Brand: Caliber: # Shots:	
Field Training Officer Emp # [redacted]	Last Name [redacted]	First Name [redacted]	M.I. [redacted]
Field Training Officer Emp # [redacted]	Last Name [redacted]	First Name [redacted]	M.I. [redacted]

E

Employee #	Last Name	First Name	M.I.
Sex: Race:	Rank:	Unit Assignment:	Work Assignment (Unit #, Module, etc.):
ShiftTime (*circle only one*): [ ] EM [ ] PM [ ] Day	ShiftType (*circle only one*): [ ] Regular [ ] Overtime [ ] Off Duty	Intoxication/Drug Usage? [ ]	Substance Used:
Hospital Admission? [ ]	Hospital Name:	Coroner Case? [ ]	Coroner Case # — Interviewed? [ ]
Hrs of sleep prior to shooting:	Duty Time (hrs):	Clothing (*circle only one*): [ ] Plain Clothes no Vest [ ] Plain Clothes w/ Vest [ ] Raid Jacket no Vest [ ] Raid Jacket w/ Vest [ ] Uniform no Vest [ ] Uniform w/ Vest	Other Factors:
Age: Height:	Weight:		
Range Qualification Date:	PPC Qualification Date:	Laser Training Date:	
Certified with Weapon Used? [ ]	Patrol Certification? [ ]	Certification Unit:	Prior Shootings? [ ] Number of Prior Shootings: Directed Force: [ ]
Weapons Fired Brand: Caliber: # Shots:		Weapons Fired Brand: Caliber: # Shots:	
Field Training Officer Emp #	Last Name	First Name	M.I.
Field Training Officer Emp #	Last Name	First Name	M.I.

E

Employee #	Last Name	First Name	M.I.
Sex: Race:	Rank:	Unit Assignment:	Work Assignment (Unit #, Module, etc.):
ShiftTime (*circle only one*): [ ] EM [ ] PM [ ] Day	ShiftType (*circle only one*): [ ] Regular [ ] Overtime [ ] Off Duty	Intoxication/Drug Usage? [ ]	Substance Used:
Hospital Admission? [ ]	Hospital Name:	Coroner Case? [ ]	Coroner Case # — Interviewed? [ ]
Hrs of sleep prior to shooting:	Duty Time (hrs):	Clothing (*circle only one*): [ ] Plain Clothes no Vest [ ] Plain Clothes w/ Vest [ ] Raid Jacket no Vest [ ] Raid Jacket w/ Vest [ ] Uniform no Vest [ ] Uniform w/ Vest	Other Factors:
Age: Height:	Weight:		
Range Qualification Date:	PPC Qualification Date:	Laser Training Date:	
Certified with Weapon Used? [ ]	Patrol Certification? [ ]	Certification Unit:	Prior Shootings? [ ] Number of Prior Shootings: Directed Force: [ ]
Weapons Fired Brand: Caliber: # Shots:		Weapons Fired Brand: Caliber: # Shots:	
Field Training Officer Emp #	Last Name	First Name	M.I.
Field Training Officer Emp #	Last Name	First Name	M.I.

See Other Side

Officer Involved Shooting
Suspect Information

Suspect Information

S 1

Last Name: Borrego	First Name: Manuel	M.I. A
AKA Last Name:	First Name:	M.I.

Sex: M Race: H	Street Address: [redacted]	City [redacted]	State & Zip Code: [redacted]
Work Phone:	Home Phone:	Social Security #:	Driver's License #: [redacted]
Age: 40 D.O.B. 08/20/77	Height: 5-04 Weight: 160	FBI # [redacted]	CII # [redacted]
Booking # N/A	Primary Charge: N/A	Secondary Charge: N/A	
Coroner Case? ☑	Coroner Case # 2018-02259	Intoxication/Drug Usage? ☑	Substance Used: Methamphetamine
Armed? ☑	Apprehended? ☑	Mental Illness? ☐	Criminal History? ☑

Vehicle Make N/A Model: Year: Parole: Yes Probation: Prior Felony Conviction: Yes

S

Last Name	First Name	M.I.
AKA Last Name	First Name	M.I.

Sex: Race:	Street Address:	City	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #	CII #
Booking #	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make Model: Year: Parole: Probation: Prior Felony Conviction:

S

Last Name	First Name	M.I.
AKA Last Name	First Name	M.I.

Sex: Race:	Street Address:	City	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #	CII #
Booking #	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make Model: Year: Parole: Probation: Prior Felony Conviction:

S

Last Name	First Name	M.I.
AKA Last Name	First Name	M.I.

Sex: Race:	Street Address:	City	State & Zip Code:
Work Phone:	Home Phone:	Social Security #:	Driver's License #:
Age: D.O.B.	Height: Weight:	FBI #	CII #
Booking #	Primary Charge:	Secondary Charge:	
Coroner Case? ☐	Coroner Case #	Intoxication/Drug Usage? ☐	Substance Used:
Armed? ☐	Apprehended? ☐	Mental Illness? ☐	Criminal History? ☐

Vehicle Make Model: Year: Parole: Probation: Prior Felony Conviction:

See Other Side

Officer Involved Shooting

URN: 018-03394-0563-013

Rollout Information

Arrival Date	Arrival Time	Date Submitted	Date of Recommendation
03/18/2018	1110	11/26/2019	

Employee #	Last Name	First Name	M.I.
[redacted]	Camacho	Omar	
[redacted]	Jordan	James	T
[redacted]	Powers	James	C

Shooting / Force Information

Method

(AW) Arwen
(BC) Baton:(Control)
(BI) Baton:(Impact)
(BF) Bodily Fluids
(CN) Canine
(CR) Carotid Restraint
(CH) Choke Hold
(CT) Control Holds:(Control Techniques)
(TT) Control Holds:(Team Takedown)
(TD) Control Holds:(Takedown)
(CE) Chemical
(OC) Chemical Agents (OC Spray)
(TG) Chemical Agents (Tear Gas)
(EX) Explosives
(FH) Firearm (Handgun)
(FR) Firearm (Rifle)
(FS) Firearm (Shotgun)
(FO) Firearm (Other)
(FB) Flashbang
(FL) Flashlight
(OE) Other Weapon: Edged
(OV) Other Weapon: Vehicle
(OB) Other Weapon: Blunt Object
(OO) Other Weapon: Other
(PK) Personal Weapon: Feet/Leg: (Kick)
(PS) Personal Weapon: Feet/Leg: (Sweep)
(PH) Personal Weapon (Hand/Arm)
(PP) Personal Weapon (Push)
(PO) Personal Weapon (Other)
(RS) Resistance
(CN) Restraint Device (Capture Net)
(RH) Restraint Device (Handcuffs)
(HB) Restraint Device:Hobble (Legs Only)
(TP) Restraint Device:Hobble (TARP)
(RE) Restraint Device: REACT Belt
(SP) Sap
(SH) Shield
(SG) 37mm Stinger
(SB) Sting Ball
(ST) Stun Bag
(TR) Taser
(UC) Uncooperative

Type of Injury

(AB) Abrasion
(BR) Bruise
(BU) Burn
(CP) Complaint of Pain
(CO) Concussion
(DH) Death
(DI) Dislocation
(DB) Dog Bite
(FR) Fractures
(GS) Gunshot
(HB) Human Bite
(LC) Lacerations
(ND) Nerve Damage
(OD) Organ Damage
(PA) Paralysis
(PW) Puncture Wound
(SD) Soft Tissue Damage
(ST) Sprain/Twists
(UN) Unconscious
(RM) Refused Med Treatment
(NN) NONE

Body Part Injured

(AD) Abdomen
(AK) Ankle
(AR) Arm
(BK) Back
(BT) Buttocks
(CH) Chest
(EL) Elbow
(FA) Face
(FE) Feet
(FI) Fingers
(GE) Genitals
(GR) Groin
(HD) Hand
(HE) Head
(HI) Hip
(IN) Internal
(KN) Knees
(LE) Leg
(NK) Neck
(SH) Shoulder
(WR) Wrist

Brand

(AK) AK-47
(BN) Benelli
(BR) Beretta
(BW) Browning
(CH) Charter Arms
(CO) Colt
(DA) Davis Industries
(GL) Glock
(HA) Harrington & Richardson
(HI) Hi Standard
(HK) H & K
(IT) Ithica
(IV) Iver Johnson
(JE) Jennings
(LO) Lorcin
(LU) Luger
(MA) Marlin
(MO) Mossberg
(NC) NCI aka SKS
(NA) North American
(NO) Norinco
(RA) Raven
(RM) Remington
(RG) RG
(RI) RGI
(RO) Rossi
(SW) Smith & Wesson
(SR) Sturm Ruger
(SS) SIG Sauer
(ST) Sterling
(TA) Taurus
(WE) Weatherby
(WN) Winchester
(US) US Government
(YY) Handmade (Inmate)
(XX) Homemade (Non-Inmate)
(ZZ) Other Brand

Caliber

(9) 9 mm
(10) 10 mm
(12) 12 guage
(20) 20 guage
(21) .22-250
(22) .22 caliber
(23) .223 caliber
(24) .243 caliber
(25) .25 caliber
(30) .308 caliber
(35) .357 caliber
(36) 30-60 caliber
(38) .38 caliber
(40) .40 caliber
(41) .410 guage
(44) .44 caliber
(45) .45 caliber
(50) 50 mm
(SL) Slug
(WW) Other caliber

FORCE APPLIED *(one code per block)*

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Part (Code)
S#1	E#1	OE					NN	
E#1	S#1	FH	HK	45	Y	Y	GS	
E#1	S#1	FH	HK	45	Y	Y	GS	NK
E#1	S#1	FH	HK	45	Y	Y	GS	SH

See Front Side